

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Ros-Lehtinen For Congress

ADDRESS (number and street)

PO Box 522784

Check if different
than previously
reported. (ACC)

Miami

FL

33152-2784

2. FEC IDENTIFICATION NUMBER ▼

C

C00280537

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

FL

27

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
08 / 26 / 2014in the
State of

FL

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2014

through

M M / D D / Y Y Y Y
08 / 06 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Antonio L. Argiz

Signature of Treasurer

Antonio L. Argiz

[Electronically Filed]

Date

M M / D D / Y Y Y Y
08 / 14 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Ros-Lehtinen For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	46264	798764.36
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	46264	798764.36
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	39212.76	776367.76
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	24.62
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	39212.76	776343.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1921215.56	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 47

Write or Type Committee Name

Ros-Lehtinen For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

40120

538656.23

(ii) Unitemized.....

0

1500

(iii) TOTAL of contributions from individuals ▶

40120

540156.23

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

6144

258608.13

(d) The Candidate.....

0

0

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

46264

798764.36

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0

0

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0

0

(b) All Other Loans.....

0

0

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0

0

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0

24.62

15. OTHER RECEIPTS (Dividends, Interest, etc.)

6025.25

20430.81

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

52289.25

819219.79

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 47

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	39212.76	776367.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	150
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS	0	6100
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	39212.76	782617.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1908139.07
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	52289.25
25. SUBTOTAL (add Line 23 and Line 24).....	1960428.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	39212.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1921215.56

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

Mr. Sanjay K. PuriMailing Address 1455 Pennsylvania Avenue NW
Suite 400

City	State	Zip Code
Washington	DC	20004-1017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Optimos, Inc.Occupation
Chairman/Funds Manager

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2014

Transaction ID : A-CF24574

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Mr. Steven Greenbaum

Mailing Address 163 Galleon Lane

City	State	Zip Code
Cudjoe Key	FL	33042-4228

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired VeteranOccupation
Retired Veteran

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2014

Transaction ID : A-CF24686

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

Ms. Evelyn I. Daes-Perez

Mailing Address 10653 NE Quaybridge Court

City	State	Zip Code
Miami Shores	FL	33138-2205

FEC ID number of contributing
federal political committee.

C

Name of Employer
E.S. Windows, LLCOccupation
Manager

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2014

Transaction ID : A-CF24582

Amount of Each Receipt this Period

2500

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 47

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

Ms. Miriam Marie Guanche

Mailing Address 5211 Granada Boulevard

City

Coral Gables

State

FL

Zip Code

33146-2030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Miami Physical Therapy Assoc

Occupation

Director

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2014

Transaction ID : A-CF24583

Amount of Each Receipt this Period

2500

Full Name (Last, First, Middle Initial)

Mr. William R. Hernandez

Mailing Address 1251 NE 108th Street
Apt. 611

City

Miami

State

FL

Zip Code

33161-7363

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2014

Transaction ID : A-CF24584

Amount of Each Receipt this Period

2500

Full Name (Last, First, Middle Initial)

Ms. Mariela Scarpetta

Mailing Address 1251 NE 108th Street
Apt. 611

City

Miami

State

FL

Zip Code

33161-7363

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2014

Transaction ID : A-CF24681

Amount of Each Receipt this Period

2500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

Dr. Donna E. Shalala Ph.D.

A.

Mailing Address 11355 Four Fillies Road

City

Pinecrest

State

FL

Zip Code

33156-4241

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Miami

Occupation

President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2014

Transaction ID : A-CF24585

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

B. Ms. Carrie Cass

Mailing Address 26603 Berino Drive

City

Saugus

State

CA

Zip Code

91350-2307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

CPA

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2014

Transaction ID : A-CF24597

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

C. Mr. William Feeley

Mailing Address 50696 Birkdale Court

City

Granger

State

IN

Zip Code

46530-9136

FEC ID number of contributing
federal political committee.

C

Name of Employer

Feeley Capital Markets, LLC

Occupation

Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2014

Transaction ID : A-CF24600

Amount of Each Receipt this Period

500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Ms. Jennifer Yamauchi

Mailing Address 1722 Diamond Street

City

San Diego

State

CA

Zip Code

92109-3301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sharp Hospital

Occupation

MRI Tech

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		30		2014

Transaction ID : A-CF24596

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

B. Ms. Sarah M. Brown

Mailing Address Apt. A5

City

Washington

State

DC

Zip Code

20009-2678

FEC ID number of contributing
federal political committee.

C

Name of Employer

Georgetown

Occupation

Administrator

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24608

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

C. Dr. Jong L. Chen M.D.

Mailing Address 4100 American River Drive

City

Sacramento

State

CA

Zip Code

95864-6025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Medical Plaza

Occupation

Urologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24645

Amount of Each Receipt this Period

1600

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Mr. Michael Chen

Mailing Address 1200 Woodcrest Drive

City

Downers Grove

State

IL

Zip Code

60516-5101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2014

Transaction ID : A-CF24646

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

B. Mrs. Pamela J. Gilardi

Mailing Address 105 Due East Avenue

City

New Smyrna Beach

State

FL

Zip Code

32169-2432

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2014

Transaction ID : A-CF24656

Amount of Each Receipt this Period

200

Earmarked contribution

Earmarked through Susan B. Anthony List, Inc.
Candidate Fund (SBA).

Full Name (Last, First, Middle Initial)

C. Susan B. Anthony List, Inc. Candidate Fund (SBA)

Mailing Address 1707 L Street NW
Suite 550

City

Washington

State

DC

Zip Code

20036-4212

FEC ID number of contributing
federal political committee.

C C00332296

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400

Date of Receipt

M M	/	D D	/	Y Y Y Y

Transaction ID : A-CF24656.e

Amount of Each Receipt this Period

200

Earmarked contribution

[MEMO ITEM]

Earmarked-Original Details. Total Earmarked via this
conduit: \$400.00. PAC limit not affected.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

Mr. Joseph 'Joe' Guiffre

Mailing Address 9417 Macklin Court

City

Alexandria

State

VA

Zip Code

22309-3028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guiffre Dist. CompanyOccupation
Retired CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24657

Amount of Each Receipt this Period

200

Earmarked Contribution

Earmarked through Susan B. Anthony List, Inc. Candidate Fund (SBA).

Full Name (Last, First, Middle Initial)

Susan B. Anthony List, Inc. Candidate Fund (SBA)

Mailing Address 1707 L Street NW

Suite 550

City

Washington

State

DC

Zip Code

20036-4212

FEC ID number of contributing
federal political committee.

C C00332296

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Transaction ID : A-CF24657.e

Amount of Each Receipt this Period

200

Earmarked Contribution

[MEMO ITEM]

Earmarked-Original Details. Total Earmarked via this conduit: \$400.00. PAC limit not affected.

Full Name (Last, First, Middle Initial)

Mrs. Jane H. Hsu

Mailing Address 3 Archway Place

City

Forest Hills

State

NY

Zip Code

11375-5255

FEC ID number of contributing
federal political committee.

C

Name of Employer

SRE

Occupation

President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24647

Amount of Each Receipt this Period

1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Dr. Ching-Chong Michael Huang

Mailing Address 38 Ridgefield Lane

City

Willowbrook

State

IL

Zip Code

60527-5200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Assoc. Anesthesiologists

Occupation

Anesthesiologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24648

Amount of Each Receipt this Period

200

Full Name (Last, First, Middle Initial)

B. Ms. Carolyn Rosen

Mailing Address 18 East 85th Street

City

New York

State

NY

Zip Code

10028-0408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker/RosenPartnersLLC

Occupation

Homemaker/Real Estate

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24605

Amount of Each Receipt this Period

1100

Full Name (Last, First, Middle Initial)

C. Ms. Carolyn Rosen

Mailing Address 18 East 85th Street

City

New York

State

NY

Zip Code

10028-0408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker/RosenPartnersLLC

Occupation

Homemaker/Real Estate

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24606

Amount of Each Receipt this Period

900

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

Mr. Daniel Rosen

Mailing Address 18 E 85th Street

City

New York

State

NY

Zip Code

10028-0408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rosen Partners, LLCOccupation
Executive/ Real Estate

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24609

Amount of Each Receipt this Period

2000

Full Name (Last, First, Middle Initial)

Mr. Chung Nan Shih

Mailing Address 1986 Braemar Drive

City

Columbus

State

OH

Zip Code

43220-3026

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24649

Amount of Each Receipt this Period

50

Full Name (Last, First, Middle Initial)

Ms. Alice Yin-Ts Tsai

Mailing Address PO Box 997

City

Woodinville

State

WA

Zip Code

98072-0997

FEC ID number of contributing
federal political committee.

C

Name of Employer
HousewifeOccupation
Housewife

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24650

Amount of Each Receipt this Period

600

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2650.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

Dr. Albert C. Yang MD

Mailing Address 1660 Bayberry Court

City

Libertyville

State

IL

Zip Code

60048-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dr. Albert C. Yang, MD

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24651

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

Mr. Hsinjin E. Yang

Mailing Address 8 Tammer Lane

City

Hopkinton

State

MA

Zip Code

01748-2654

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24652

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

Ms. Qing Ye

Mailing Address 5338 97th Street
Apt. 3

City

Corona

State

NY

Zip Code

11368-3080

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAEG

Occupation

VP

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24604

Amount of Each Receipt this Period

1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

Dr. Masao Siang-Siu Yu MD

A.

Mailing Address 230 Crosse Road

City

Amherst

State

OH

Zip Code

44001-9605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Masao S. Yu, MD, Inc.Occupation
Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24653

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

Mr. Harris Bak

B.

Mailing Address 132 Overlook Road

City

New Rochelle

State

NY

Zip Code

10804-4139

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ortelius CapitalOccupation
Actuary

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1200

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24620

Amount of Each Receipt this Period

1200

Full Name (Last, First, Middle Initial)

Mr. Ron Bindow

C.

Mailing Address 32 Cooper Road

City

Scarsdale

State

NY

Zip Code

10583-2832

FEC ID number of contributing
federal political committee.

C

Name of Employer
Advocate Brokerage Corp.Occupation
Insurance Broker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24621

Amount of Each Receipt this Period

600

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2050.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Ms. Doris Chance

Mailing Address 2 Piping Brook Lane

City

Bedford

State

NY

Zip Code

10506-2208

FEC ID number of contributing
federal political committee.

C

Name of Employer

Douglas Elliman Real Estate

Occupation

Real Estate

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24622

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

B. Mr. Matt Greenberg

Mailing Address 4 Hillview Drive

City

Scarsdale

State

NY

Zip Code

10583-7532

FEC ID number of contributing
federal political committee.

C

Name of Employer

MRJ Capital

Occupation

Portfolio Manager

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24623

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

C. Dr. Bruce Greenstein MD

Mailing Address 327 Heathcote Road

City

Scarsdale

State

NY

Zip Code

10583-7107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bruce Greenstein, MD

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24624

Amount of Each Receipt this Period

300

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

Dr. Lawrence Grunfeld

A.

Mailing Address 22 Jerome Avenue

City

New Rochelle

State

NY

Zip Code

10804-3804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lawrence Grunfeld, MD

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		02		2014

Transaction ID : A-CF24625

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

Mr. Michael Kleinberg

B.

Mailing Address 65 Ramona Court

City

New Rochelle

State

NY

Zip Code

10804-1908

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Architect

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		02		2014

Transaction ID : A-CF24626

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

Mr. Dennis Monasebian

C.

Mailing Address 188 Byram Lake Road

City

Armonk

State

NY

Zip Code

10504-1509

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Real Estate Developer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		02		2014

Transaction ID : A-CF24627

Amount of Each Receipt this Period

300

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

Mrs. Cheryl Pine

Mailing Address 19 Scott Circle

City

State

Zip Code

Purchase

NY

10577-1905

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Real Estate / Finance

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24628

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

Mr. Joseph Rafalowcz

Mailing Address 1 Fenimore Road

City

State

Zip Code

New Rochelle

NY

10804-2103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Joseph Rafalowcz, AttyAtLaw

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24629

Amount of Each Receipt this Period

600

Full Name (Last, First, Middle Initial)

Mr. Ronald Rettner

Mailing Address 34 Bonwit Road

City

State

Zip Code

Rye Brook

NY

10573-1437

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rettner Management

Occupation

President

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24658

Amount of Each Receipt this Period

500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1400.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Mr. Ronald Rettner

Mailing Address 34 Bonwit Road

City

Rye Brook

State

NY

Zip Code

10573-1437

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rettner Management

Occupation

President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24659

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

B. Mr. Alan Rice

Mailing Address 24 Runyon Place

City

Scarsdale

State

NY

Zip Code

10583-7008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Business Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24630

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

C. Mr. David Samot

Mailing Address 18 Sturbridge Place

City

Scarsdale

State

NY

Zip Code

10583-6020

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Accountant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24632

Amount of Each Receipt this Period

300

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

Mr. David Shatz

Mailing Address 29 Montrose Road

City

Scarsdale

State

NY

Zip Code

10583-1129

FEC ID number of contributing
federal political committee.

C

Name of Employer

David Shatz

Occupation

Self Employed

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24633

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

Dr. Ken Sherman

Mailing Address 149 Wykagyl Terrace

City

New Rochelle

State

NY

Zip Code

10804-3124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dr. Ken Sherman, MD

Occupation

Neuropsychologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

120

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24634

Amount of Each Receipt this Period

120

Full Name (Last, First, Middle Initial)

Mr. Mark Teich

Mailing Address 125 Sterling Road

City

Harrison

State

NY

Zip Code

10528-1128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Plumbing Contractor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24635

Amount of Each Receipt this Period

300

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

720.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 20 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Mr. Stanley Wasserman

Mailing Address 2144 Trenor Drive

City

New Rochelle

State

NY

Zip Code

10804

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Real Estate

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1200

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24636

Amount of Each Receipt this Period

1200

Full Name (Last, First, Middle Initial)

B. Mr. Alfred Weissman

Mailing Address 805 Taylors Lane

City

Mamaroneck

State

NY

Zip Code

10543-4251

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Real Estate

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24637

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

C. Mr. Bob Wiener

Mailing Address 1 Skibo Lane

City

Mamaroneck

State

NY

Zip Code

10543-4722

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Real Estate

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24638

Amount of Each Receipt this Period

600

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

Dr. Arnie Wilson

Mailing Address 123 Dorchester Road

City

Scarsdale

State

NY

Zip Code

10583-6052

FEC ID number of contributing
federal political committee.

C

Name of Employer

Arnie Wilson, MD

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24639

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

Mrs. Sosik Yeung

Mailing Address 1446 Donhill Drive

City

Beverly Hills

State

CA

Zip Code

90210-2216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Housewife

Occupation

Housewife

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24599

Amount of Each Receipt this Period

2500

Full Name (Last, First, Middle Initial)

Mrs. Sosik Yeung

Mailing Address 1446 Donhill Drive

City

Beverly Hills

State

CA

Zip Code

90210-2216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Housewife

Occupation

Housewife

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24602

Amount of Each Receipt this Period

100

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2900.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Mrs. Sosik Yeung

Mailing Address 1446 Donhill Drive

City

Beverly Hills

State

CA

Zip Code

90210-2216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Housewife

Occupation

Housewife

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24603

Amount of Each Receipt this Period

2400

Full Name (Last, First, Middle Initial)

B. Mr. Frederic S. Bogart

Mailing Address 770 Taylors Lane

City

Mamaroneck

State

NY

Zip Code

10543-4250

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		05		2014

Transaction ID : A-CF24640

Amount of Each Receipt this Period

600

Full Name (Last, First, Middle Initial)

C. Mr. Larry Goldstein

Mailing Address 1865 Palmer Avenue

City

Larchmont

State

NY

Zip Code

10538-3048

FEC ID number of contributing
federal political committee.

C

Name of Employer

SMP Asset Mngmnt. LLC

Occupation

Asset Management

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		05		2014

Transaction ID : A-CF24641

Amount of Each Receipt this Period

600

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

Mr. Gerald Lieberman

Mailing Address 10 Old Woods Drive

City

Harrison

State

NY

Zip Code

10528-2420

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired Financial Consultant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2014

Transaction ID : A-CF24642

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

Mr. Ari Raskas

Mailing Address 805 Wilmot Road

City

Scarsdale

State

NY

Zip Code

10583-6528

FEC ID number of contributing
federal political committee.

C

Name of Employer

RK Equity

Occupation

Banker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2014

Transaction ID : A-CF24643

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

600.00

40120.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 47

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

NEA Fund For Children And Public Education

Mailing Address 1201 16th Street NW

Suite 420

City

Washington

State

DC

Zip Code

20036-3201

FEC ID number of contributing
federal political committee.

C C00003251

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M / D D / Y Y Y Y
07 12 2014

Transaction ID : A-CF24685

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

B. Distilled Spirits Political Action Committee (DISPAC)

Mailing Address 1250 I Street NW

Suite 400

City

Washington

State

DC

Zip Code

20005-5977

FEC ID number of contributing
federal political committee.

C C00030734

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

268.84

Date of Receipt

M M / D D / Y Y Y Y
07 15 2014

Transaction ID : A-IF24573

Amount of Each Receipt this Period

144

Inkind: Specialty Cocktail Alcohol

Full Name (Last, First, Middle Initial)

C. American Podiatric Medical Association Political Action Committee (APMA PAC)

Mailing Address 9312 Old Georgetown Road

City

Bethesda

State

MD

Zip Code

20814-1621

FEC ID number of contributing
federal political committee.

C C00008839

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M / D D / Y Y Y Y
07 31 2014

Transaction ID : A-CF24655

Amount of Each Receipt this Period

1000

SUBTOTAL of Receipts This Page (optional).....

2144.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Honeywell International Political Action Committee (HIPAC)

 Mailing Address 101 Constitution Avenue NW
 Suite 500

City	State	Zip Code
Washington	DC	20001-2133

FEC ID number of contributing federal political committee.

C C00096156

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24654

Amount of Each Receipt this Period

2000

Full Name (Last, First, Middle Initial)

B. Taiwanese American Victory Fund PAC (TAVF-PAC)

Mailing Address 273 Wyckoff Avenue

City	State	Zip Code
Brooklyn	NY	11237-5504

FEC ID number of contributing federal political committee.

C C00385435

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : A-CF24644

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

C. International Union of Painters and Allied Trades Political Action Cmte. (IUPAT)

Mailing Address 7234 Parkway Drive

City	State	Zip Code
Hanover	MD	21076-1307

FEC ID number of contributing federal political committee.

C C00000885

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2014

Transaction ID : A-CF24607

Amount of Each Receipt this Period

1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

6144.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

Capital One

A.

Mailing Address PO Box 4199

City

Houston

State

TX

Zip Code

77210-4199

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1683.88

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		03		2014

Transaction ID : A-MF24683

Amount of Each Receipt this Period

1060.48

Interest

Full Name (Last, First, Middle Initial)

Community Bank of Florida

B.

Mailing Address 28801 SW 157th Avenue

City

Homestead

State

FL

Zip Code

33033-2437

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4719.45

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		03		2014

Transaction ID : A-MF24682

Amount of Each Receipt this Period

4719.45

Interest

Full Name (Last, First, Middle Initial)

Regions Bank

C.

Mailing Address 2700 NE 8th Street

City

Homestead

State

FL

Zip Code

33033-5699

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

245.32

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		03		2014

Transaction ID : A-MF24684

Amount of Each Receipt this Period

245.32

Interest

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6025.25

6025.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address PO Box 660481

City	State	Zip Code
Dallas	TX	75266-0481

Purpose of Disbursement
Administrative/Salary/Overhead: Courier

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

Amount of Each Disbursement this Period

16.18

Transaction ID : B-E-24588

B. The Hon. Ileana Ros-Lehtinen

Mailing Address PO Box 522784

City	State	Zip Code
Miami	FL	33152-2784

Purpose of Disbursement
Travel Expense Reimb.

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

Amount of Each Disbursement this Period

1493.7

Transaction ID : B-E-24577

C. Mr. Andres V. UzcateguiMailing Address 1541 Brickell Avenue
Apt. 3404

City	State	Zip Code
Miami	FL	33129-1228

Purpose of Disbursement
Administrative/Salary/Overhead: Payroll

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2014

Amount of Each Disbursement this Period

432.78

Transaction ID : B-E-24580

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1942.66

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Aristotle International, Inc.

Mailing Address 205 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-1164

Purpose of Disbursement
Computer Systems

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

2100

Transaction ID : B-E-24589

B. AT&T (0767)

Mailing Address PO Box 105503

City	State	Zip Code
Atlanta	GA	30348-5503

Purpose of Disbursement
Telephone

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

267.49

Transaction ID : B-E-24711

c. FedEx

Mailing Address PO Box 660481

City	State	Zip Code
Dallas	TX	75266-0481

Purpose of Disbursement
Courier Service

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

7.74

Transaction ID : B-E-24587

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2375.23

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. U Haul Moving Storage

Mailing Address 6701 S Dixie Highway

City	State	Zip Code
South Miami	FL	33143-7715

Purpose of Disbursement
Travel Expense

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2014

Amount of Each Disbursement this Period

219.3

Transaction ID : B-E-24712

B. AT&T (0767)

Mailing Address PO Box 105503

City	State	Zip Code
Atlanta	GA	30348-5503

Purpose of Disbursement
Telephone

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2014

Amount of Each Disbursement this Period

124.45

Transaction ID : B-E-24740

C. AT&T (2645)

Mailing Address PO Box 105773

City	State	Zip Code
Atlanta	GA	30348-5773

Purpose of Disbursement
Telephone

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2014

Amount of Each Disbursement this Period

978.3

Transaction ID : B-E-24741

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1322.05

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Office Depot (7240 Kendall)

Mailing Address 7240 SW 88th Street

City	State	Zip Code
Miami	FL	33156

Purpose of Disbursement
Campaign Supplies

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2014

Amount of Each Disbursement this Period

66.93

Transaction ID : B-E-24713

B. T-Mobile

Mailing Address PO Box 790047

City	State	Zip Code
Saint Louis	MO	63179-0047

Purpose of Disbursement
Telephone

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2014

Amount of Each Disbursement this Period

178.87

Transaction ID : B-E-24742

C. Casa Larios Restaurant

Mailing Address 5859 SW 73rd Street

City	State	Zip Code
South Miami	FL	33143-5243

Purpose of Disbursement
Campaign Meal

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2014

Amount of Each Disbursement this Period

97.79

Transaction ID : B-E-24715

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

343.59

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Harry's Reserve

Mailing Address 909 New Jersey Avenue SE

City	State	Zip Code
Washington	DC	20003-3382

Purpose of Disbursement
Campaign Meal

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2014

Amount of Each Disbursement this Period

253.94

Transaction ID : B-E-24733

B. Shoppers Food Pharmacy

Mailing Address 3801 Jefferson Davis Highway

City	State	Zip Code
Alexandria	VA	22305-3118

Purpose of Disbursement
Campaign Supplies

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2014

Amount of Each Disbursement this Period

114.3

Transaction ID : B-E-24714

C. Boston Market

Mailing Address 2046 Wilson Boulevard

City	State	Zip Code
Arlington	VA	22201-3007

Purpose of Disbursement
Campaign Event: Campaign Event Meal

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2014

Amount of Each Disbursement this Period

512.28

Transaction ID : B-E-24717

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

880.52

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Constant Contact, IncMailing Address 1601 Trapelo Road
Suite 329

City Waltham State MA Zip Code 02451-7357

Purpose of Disbursement
Travel: Travel Expense

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	11	2014

Amount of Each Disbursement this Period

110

Transaction ID : B-E-24693

B. Banana Cafe

Mailing Address 500 8th Street SE

City Washington State DC Zip Code 20003-2834

Purpose of Disbursement
Campaign Meal

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2014

Amount of Each Disbursement this Period

154.74

Transaction ID : B-E-24718

c. Florida Department of Revenue

Mailing Address 5050 W Tennessee Street

City Tallahassee State FL Zip Code 32399-6586

Purpose of Disbursement
Administrative/Salary/Overhead: Taxes

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2014

Amount of Each Disbursement this Period

36.82

Transaction ID : B-E-24744

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

301.56

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Matchbox Capitol Hill

Mailing Address 521 8th Street SE

City	State	Zip Code
Washington	DC	20003-2835

Purpose of Disbursement
Campaign Event: Campaign Event Meal

007

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2014

Amount of Each Disbursement this Period

456.96

Transaction ID : B-E-24719

B. Nutral Lounge

Mailing Address 15 W 37th Street

City	State	Zip Code
New York	NY	10018-6223

Purpose of Disbursement
Travel: Campaign Travel

002

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2014

Amount of Each Disbursement this Period

484

Transaction ID : B-E-24735

c. Pizza Bolis

Mailing Address 417 8th Street SE

City	State	Zip Code
Washington	DC	20003-2833

Purpose of Disbursement
Campaign Meal

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2014

Amount of Each Disbursement this Period

119.3

Transaction ID : B-E-24720

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1060.26

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Sitelock.comMailing Address 1637 Race Track Road
Suite 203

City Saint Johns State FL Zip Code 32259-3238

Purpose of Disbursement
Campaign Supplies

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2014

Amount of Each Disbursement this Period

64

Transaction ID : B-E-24722

B. The H Street Country Club

Mailing Address 1335 H Street NE

City Washington State DC Zip Code 20002-4406

Purpose of Disbursement
Campaign Event: Campaign Event Meal

007

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2014

Amount of Each Disbursement this Period

321.45

Transaction ID : B-E-24723

c. US Treasury, Internal Revenue Service (IRS)

Mailing Address PO Box 660264

City Dallas State TX Zip Code 75266-0264

Purpose of Disbursement
Administrative/Salary/Overhead: Taxes

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2014

Amount of Each Disbursement this Period

2803.49

Transaction ID : B-E-24743

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3188.94

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. AmtrakMailing Address 50 Massachusetts Avenue, N.E.
Union Station

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel: Travel Expense

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	15	2014

Amount of Each Disbursement this Period

152

Transaction ID : B-E-24694

B. Bread & Butter

Mailing Address 2330 Salzedo Street

City Coral Gables State FL Zip Code 33134-5033

Purpose of Disbursement
Campaign Event: Campaign Event Meal

007

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	15	2014

Amount of Each Disbursement this Period

772

Transaction ID : B-E-24736

C. Distilled Spirits Political Action Committee (DISPAC)Mailing Address 1250 I Street NW
Suite 400

City Washington State DC Zip Code 20005-5977

Purpose of Disbursement
Inkind: Specialty Cocktail AlcoholCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	15	2014

Amount of Each Disbursement this Period

144

Transaction ID : B-I-24573

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1068.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. AmtrakMailing Address 50 Massachusetts Avenue, N.E.
Union Station

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel: Travel Expense

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2014

Amount of Each Disbursement this Period

366

Transaction ID : B-E-24696

B. Cash

Mailing Address PO Box 52-2784

City Miami State FL Zip Code 33152-2784

Purpose of Disbursement
Petty Cash, NYC

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2014

Amount of Each Disbursement this Period

100

Transaction ID : B-E-24617

c. Mrs. Maria Cristina Del PortilloMailing Address 10836 SW 88th Street
Apt. V12

City Miami State FL Zip Code 33176-1353

Purpose of Disbursement
Reimbursements: food, stamps, parking

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2014

Amount of Each Disbursement this Period

262.69

Transaction ID : B-E-24615

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

728.69

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Mr. Andres V. UzcateguiMailing Address 1541 Brickell Avenue
Apt. 3404

City Miami State FL Zip Code 33129-1228

Purpose of Disbursement
Payroll 7/5-7/18/2014

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		18		2014

Amount of Each Disbursement this Period

432.78

Transaction ID : B-E-24610

B. Mr. Roger Zimmerman

Mailing Address 311 NW 19th Street

City Homestead State FL Zip Code 33030-3112

Purpose of Disbursement
Reimbursement, May 2014

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		18		2014

Amount of Each Disbursement this Period

646.94

Transaction ID : B-E-24591

c. Mr. Roger Zimmerman

Mailing Address 311 NW 19th Street

City Homestead State FL Zip Code 33030-3112

Purpose of Disbursement
Reimbursement, June 2014

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		19		2014

Amount of Each Disbursement this Period

585.06

Transaction ID : B-E-24592

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1664.78

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Harrison Car Service

Mailing Address 71 Batavia Place

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2014

City	State	Zip Code
Harrison	NY	10528-2925

Amount of Each Disbursement this Period

231.77

Purpose of Disbursement
Travel: Campaign Travel

002

Transaction ID : B-E-24737

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. Wall Street Entertainment CoporationMailing Address 177 Main Street
281

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2014

City	State	Zip Code
Fort Lee	NJ	07024-6936

Amount of Each Disbursement this Period

1540

Purpose of Disbursement
Campaign Event: Campaign Event

007

Transaction ID : B-E-24701

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

c. City Lobster

Mailing Address 121 W 49th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2014

City	State	Zip Code
New York	NY	10020

Amount of Each Disbursement this Period

270.65

Purpose of Disbursement
Campaign Meal

001

Transaction ID : B-E-24705

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2042.42

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 47

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. NYC Yellow Cab Taxi

Mailing Address 180 Greenpoint Avenue

City	State	Zip Code
Brooklyn	NY	11222-2332

Purpose of Disbursement
Travel: Campaign Travel

002

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2014

Amount of Each Disbursement this Period

14.3

Transaction ID : B-E-24697

B. NYC Yellow Cab Taxi

Mailing Address 180 Greenpoint Avenue

City	State	Zip Code
Brooklyn	NY	11222-2332

Purpose of Disbursement
Travel: Campaign Travel

002

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2014

Amount of Each Disbursement this Period

15.5

Transaction ID : B-E-24698

c. NYC Yellow Cab Taxi

Mailing Address 180 Greenpoint Avenue

City	State	Zip Code
Brooklyn	NY	11222-2332

Purpose of Disbursement
Travel: Campaign Travel

002

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2014

Amount of Each Disbursement this Period

22.1

Transaction ID : B-E-24699

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

51.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. NYC Yellow Cab Taxi

Mailing Address 180 Greenpoint Avenue

City	State	Zip Code
Brooklyn	NY	11222-2332

Purpose of Disbursement
Travel: Travel Expense

002

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2014

Amount of Each Disbursement this Period

24.1

Transaction ID : B-E-24700

B. The New York Palace Hotel

Mailing Address 455 Madison Avenue

City	State	Zip Code
New York	NY	10022-6845

Purpose of Disbursement
Travel: Campaign Travel

002

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2014

Amount of Each Disbursement this Period

2121.66

Transaction ID : B-E-24728

c. GoGoAir.comMailing Address 1250 N Arlington Heights Road
Suite 500

City	State	Zip Code
Itasca	IL	60143-1216

Purpose of Disbursement
Travel: Campaign Travel

002

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		23		2014

Amount of Each Disbursement this Period

49.95

Transaction ID : B-E-24730

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2195.71

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. NYC Yellow Cab Taxi

Mailing Address 180 Greenpoint Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		23		2014

City	State	Zip Code
Brooklyn	NY	11222-2332

Amount of Each Disbursement this Period

13.7

Purpose of Disbursement
Travel: Travel Expense

002

Transaction ID : B-E-24706

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. Rockefeller Center Summer Garden & BarMailing Address Rockefeller Center
5th Ave. Between 49th & 50th St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		23		2014

City	State	Zip Code
New York	NY	10020

Amount of Each Disbursement this Period

961.8

Purpose of Disbursement
Campaign Meals

001

Transaction ID : B-E-24708

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

c. U Haul Moving Storage

Mailing Address 6701 S Dixie Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		23		2014

City	State	Zip Code
South Miami	FL	33143-7715

Amount of Each Disbursement this Period

224.65

Purpose of Disbursement
Travel: Campaign Travel

002

Transaction ID : B-E-24729

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1200.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Mr. Andres V. UzcateguiMailing Address 1541 Brickell Avenue
Apt. 3404City State Zip Code
Miami FL 33129-1228Purpose of Disbursement
Payroll 7/19-8/1/2014

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
07	23	2014

Amount of Each Disbursement this Period

432.78

Transaction ID : B-E-24611

B. Mr. Andres V. UzcateguiMailing Address 1541 Brickell Avenue
Apt. 3404City State Zip Code
Miami FL 33129-1228Purpose of Disbursement
Travel Expense Reimb.

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
07	23	2014

Amount of Each Disbursement this Period

341.17

Transaction ID : B-E-24613

C. AT&T (2645)

Mailing Address PO Box 105773

City State Zip Code
Atlanta GA 30348-5773Purpose of Disbursement
Telephone

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
07	24	2014

Amount of Each Disbursement this Period

5.07

Transaction ID : B-E-24594

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

779.02

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address PO Box 660481

City	State	Zip Code
Dallas	TX	75266-0481

Purpose of Disbursement
Overnight Courier

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		24		2014

Amount of Each Disbursement this Period

17.97

Transaction ID : B-E-24595

B. Marriott 33710 La Guardia

Mailing Address 9010 Ditmars Boulevard

City	State	Zip Code
East Elmhurst	NY	11369-1133

Purpose of Disbursement
Travel: Travel Expense

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		24		2014

Amount of Each Disbursement this Period

269.02

Transaction ID : B-E-24707

c. Tamiami Canal Management

Mailing Address 12039 SW 117th Court

City	State	Zip Code
Miami	FL	33186-5202

Purpose of Disbursement
August 2014 Warehouse Rent

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2014

Amount of Each Disbursement this Period

972.77

Transaction ID : B-E-24619

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1259.76

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Mrs. Debra M. Zimmerman

Mailing Address 311 NW 19th Street

City	State	Zip Code
Homestead	FL	33030-3112

Purpose of Disbursement
Payroll July 2014

001

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2014

Amount of Each Disbursement this Period

4787.74

Transaction ID : B-E-24618

B. Hill Country Barbecue Market

Mailing Address 30 W 26th Street

City	State	Zip Code
New York	NY	10010-2011

Purpose of Disbursement
Campaign Event: Campaign Event Meal

007

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		30		2014

Amount of Each Disbursement this Period

840.05

Transaction ID : B-E-24739

C. Walgreens

Mailing Address 861 NE 8th Street

City	State	Zip Code
Homestead	FL	33030-5021

Purpose of Disbursement
Campaign Supplies

001

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		30		2014

Amount of Each Disbursement this Period

461.15

Transaction ID : B-E-24731

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6088.94

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ros-Lehtinen For Congress

Full Name (Last, First, Middle Initial)

A. Rally/PiryaMailing Address 401 W 15th Street
Suite 520

City Austin State TX Zip Code 78701-1671

Purpose of Disbursement
Transaction Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

Amount of Each Disbursement this Period

1012.35

Transaction ID : B-E-24746

B. Mr. Andres V. UzcateguiMailing Address 1541 Brickell Avenue
Apt. 3404

City Miami State FL Zip Code 33129-1228

Purpose of Disbursement
Payroll (replacement)

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

Amount of Each Disbursement this Period

432.78

Transaction ID : B-E-24601

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1445.13

38286.06